

URBAN DISTRICT OF WEST BRIDGFORD.ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH  
for the Year 1944.

To the Chairman and Members of the  
West Bridgford Urban District Council.

Gentlemen,

I beg to present my Annual Report for the Year 1944. The Ministry of Health have removed the prohibition on the publication of certain figures and other information and have suggested a somewhat fuller report this year but they have not called for the projected report which was to summarise the war years.

Housing is the big need just now and West Bridgford is more fortunate than some towns in that bomb damage was not great and we started the war without any slums. Accordingly we can concentrate on new housing.

Gradually it will be possible to restore to practice the public health standards which the war compelled us to forget. Overcrowding will rank high in our minds but there are other lapses, especially in connection with the food supply, which must be retrieved before we allow ourselves to forget our past attainments.

The year under review saw a sudden influx of evacuees to an area which had previously been neutral. Improvisation was called for to the extent of considerable risk and the period - mercifully fairly short - brought much anxiety to all responsible for the public health. Fortunately those crises induce a spirit of co-operation which serves to overcome each difficulty as it arises.

Gradually during the year the Civil Defence Casualty Service was reduced, and it is appropriate in this Report to pay tribute to the members of that Service, not only for their good work in their proper sphere, but for all the many "extraneous duties" they undertook. While their help was appreciated all the time its withdrawal emphasised its importance. Small Public Health Departments were able to undertake work which would have seemed impossible without their aid - in such activities as diphtheria immunisation, evacuation, the ambulance service, and general emergency administration.

The Voluntary Societies have expressed a desire to carry forward into peace-time some of their war-time activities and it is to be hoped that it may be possible to co-operate with them and keep alive the spirit which animated us all during the years of crisis. The changing social conditions whereby more people are employed outside their homes and illness and other misfortunes reveal the lack of neighbourly help, at one time more readily available, make it incumbent on us to organise a system of "helps", voluntary or paid, so that some of the distresses we have seen of late may be alleviated.

Social work in a County District, such as West Bridgford, is a problem in that the County Council administer the statutory services, which are the framework, while the local people have the more intimate knowledge of the local needs and are more able to supplement the statutory provisions. The Education Act seems to take cognisance of this problem and to be designed to meet it and one hopes that when the National Health Service Bill appears the same desire will be shown throughout to make use of local knowledge and enthusiasm.

White Papers and Reports were a feature of the latter half of the war period but 1944 saw little actual public health legislation. The Education Act, although not directly affecting this department, was probably of most interest. We await with keen anticipation the Government's Bills to implement the White Paper on a National Health Service and on Social Insurance. The years ahead should not lack interest.

I thank you, Gentlemen, for your courtesy and help in our work together.

I am,

Yours faithfully,

W.B. WATSON,

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Chairman of Health Committee - Councillor P.A. Izzett, J.P., C.C.,

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Public Health Officers.

Medical Officer of Health. W.B. Watson, L.R.C.P., L.R.C.S., D.P.H.,  
Sanitary Inspector. J. Eckersley, A.R.S.I., R.P.,

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Engineer & Surveyor. H. Carmichael, M.I.H. & Cy.E., M.R.S.I.,

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Statistics.

Area of District.	3,501 acres.
Registrar-General's estimate of resident population, mid - 1944.	22,000.
Number of inhabited houses.	7,000 approx.
Rateable value, Sept. 1944.	£197,315.
Product of penny rate per annum.	£808.

	<u>Total.</u>	<u>M.</u>	<u>F.</u>
Live births	376	191	185
Birth rate (per 1,000 pop.)	17.1 (Eng. & Wales 17.6)		
Deaths	258	140	118
Death rate (per 1,000 pop.)	11.7 (Eng. & Wales 11.6)		
Death rate of infants under one year of age (per 1,000 live births).	40 (Eng. & Wales 46)		



Population. Not until the distribution of the people throughout the Country becomes stable and a fresh census has been taken will it be possible to rely on the figures of population, at least for estimating the birth rate and death rate. The rates for the <sup>war</sup> years are probably not very accurate. The Registrar-General's figures of population for the <sup>war</sup> years are; 1939 - 21,340; 1940 - 22,490; 1941 - 23,060; 1942 - 22,160; 1943 - 21,530; and now, in 1944, 22,000.

The Birth Rate. was 3.3 higher than the previous highest rate in my records of the last 15 years and it now approaches the national figure for the first time in these records. It remains to be seen whether this figure represents a real and lasting change in the reproduction rate of the District or whether it is due partly to transient effects of the war and partly to an under-estimation of the figure of population.

The Death Rates for the past five years are:- 12.1, 14.3, 10.9, 13.2, and 11.7. It is not possible at present to calculate the corrected death rate (which in normal times discounts local peculiarities of age and sex distribution of the population) owing to the unsettled distribution of the population. The corrected rate for West Bridgford used to be about 1.0 less than the crude rate.

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Ambulance Facilities. The Council have two ambulances with, at present, a war-time Civil Defence vehicle as a reserve. Since the nationalisation of the Fire Service these have been driven by Civil Defence personnel and the Civil Defence Ambulances were freely used to supplement the service. The demand for ambulances has been steadily increasing but in part, no doubt, the limited use of private cars has contributed to the increase. One of the post-war aims is to co-ordinate and rationalise the ambulance services throughout the Country so as to cut down delays and eliminate refusals when ambulances are summoned, one district helping another. The Government's White Paper on a National Health Service foreshadows the control being identical with that of the hospital service.

Water. The supply (from the Nottingham Corporation) has been satisfactory in quantity and quality. No samples are taken by this Council. There are only two or three outlying houses without a piped supply. One of these has a camping site attached and chlorination of the water from a bore is carried out.

Drainage. Flooding in certain parts of the District, especially in Wilford, has caused considerable inconvenience to residents and anxiety to the Local Authority. Cellars in West Bridgford are always liable to flooding and will no doubt not be constructed in the future. As regards Wilford the position has been further aggravated by mining subsidence and the remedy presents a considerable problem which, owing to the approximation of levels with that of the river Trent, would appear to be soluble only by filling in the ground permanently affected.

Scabies and Verminous Conditions. There is no cleansing centre in West Bridgford. The need for it for the treatment of scabies has not been greatly felt, home treatment of the few cases notified having proved effective. In the case of an outbreak amongst evacuees in a communal billet improvised arrangements worked satisfactorily. The new Education Act would seem to emphasise the importance of cleansing centres so that it seems likely that co-operation with the Education Authority may be proposed. So long as the Scabies Order (made under the Defence Regulations) remains in force the responsibility for treatment at a centre rests with the District Authority.



There is an increasing demand for a school clinic in West Bridgford and the two facilities could best be considered together.

Housing. In common with most districts the shortage of houses has been acutely felt and the Sanitary Inspector has spent much of his time helping and advising the unfortunate victims of the shortage. Some of the condemned houses in Wilford, requisitioned at first for evacuees, have been subsequently made available for local residents. At the present time (September, 1945) a start is being made on new houses and one hopes that the most optimistic of the various forecasts may prove attainable. Fortunately West Bridgford has few or no houses requiring demolition, other than those already under order, so that concentration on new housing can be made. It is plain to anyone, however, that many houses require a great deal of attention to render them thoroughly fit and sanitary after six years of comparative neglect.

Milk Supply. Regular sampling of milk is done and on the whole the reports are good. But the public are far from satisfied and indeed the shortage of labour and materials has sometimes been responsible for lapses which have resulted in lowered keeping quality. The withdrawal of the freedom of the housewife to apply the usual peace-time remedy of changing her retailer has no doubt contributed to the feeling of dissatisfaction. Certainly it is contrary to human nature - and reason - not to be able to exercise a choice in the selection of commodities and their purveyors and if milk is to be bulked and standardised in the future let us hope that there will be no variation below a highly satisfactory level of quality and cleanliness. Admittedly milk is a food difficult to produce beyond reproach but our campaign to increase its consumption can only be justified if we are prepared to deliver it safe, clean, and able to remain fresh for a reasonable time.

Rats. Every effort has been made to comply in the spirit and to the letter of the law, peace-time and war-time, and the full-time rat-catcher, under the direction of the Sanitary Inspector, has continued to take a heavy toll. Rat infestation in this area, however, is severe and the same sustained efforts will be required permanently. The avoidance of litter and the rat-proofing of premises are two very necessary measures and these are the responsibility of each occupier. Fatalism, qualified by a demand for the rat-catcher, is uncooperative.

Nursing in the Home. The West Bridgford Nursing Association provide two nurses. During the year the scheme initiated at the end of 1943, during the epidemic of influenza, by which help was secured through the British Red Cross Society and the Women's Voluntary Service for households temporarily embarrassed by illness, continued in operation and proved a blessing in the few cases where help was sought. There is a growing need for such a service and it seems likely that when conditions become normal the provision of home helps will become an established public health practice. At the end of 1944 the Government gave specific authority to Welfare Authorities to establish a service of home helps but these Authorities can do little until suitable women are available. The changes in social conditions whereby relatives and neighbours of the sick are not so readily available to help are leading to much hardship and embarrassment and although it is a pity to see the decay of the old practice of neighbourly help we must acknowledge the changed conditions and organise a system of paid help. The cost would be met as far as possible by those receiving the help.

Infectious Disease. The year was uneventful. There were no cases of enteric fever and cerebrospinal meningitis and only two cases of diphtheria (the lowest for any year of which I have records). Scarlet fever was moderate in incidence (39). Fifteen cases of scarlet fever and two of diphtheria were sent to hospital.

In quiet times the hospital of the South Notts. Joint Hospital Board is able to accept all cases but as soon as the incidence of scarlet fever increases difficulty in obtaining admission is met with and accommodation in other hospitals has to be sought. Admission to other hospitals, usually those in the cities, has always to be sought for patients with infectious diseases other than scarlet fever and diphtheria.

The notifications of tuberculosis have not shown any significant change during the war.

Diphtheria Immunisation. A monthly session is held and attendance is well maintained although the number of pre-school children coming to the clinic is only about half of the number of births. An enquiry was made of the private practitioners as to the number of children they were immunising privately and the replies showed that a considerable number of the babies not seen at the public clinic were being immunised by their own doctors. The following are extracts from the return sent to the Ministry of Health at the end of 1944:

Percentage of the child population considered to be immunised -

Under five years of age - 64

Between five and fifteen - 78.

As children are not immunised until they reach the age of twelve months it is of interest to note that, calculating only on the numbers between one and five years of age, 80% of pre-school children are believed to be immunised.

A "boosting" dose is now being offered at 5 years of age for all children previously treated at 12 months. Approximately two thirds of those invited have accepted, so far.

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